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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/747,675	12/30/2003	Scott K. Brown	06975-379001 / AOL 139	2909
26171 FISH & RICH	7590 04/04/2008 ARDSON P.C.	EXAMINER		
P.O. BOX 1022			LEE, CHUN KUAN	
MINNEAPOL	IS, MN 55440-1022		ART UNIT	PAPER NUMBER
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			04/04/2008	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Interview Summary

 Application No.
 Applicant(s)

 10/747,675
 BROWN ET AL.

 Examiner
 Art Unit

 Chun-Kuan Lee
 2181

All participants (applicant, applicant's representative, PTC	personnel):
(1) Alford Kindred (SPE).	(3)Hussein Akhavannik (Reg. # 59,347).
(2) <u>Chun-Kuan Lee (Examiner)</u> .	(4)
Date of Interview: 24 March 2008.	
Type: a)☐ Telephonic b)☐ Video Conference c)☑ Personal [copy given to: 1)☐ applicant	2)⊠ applicant's representative]
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.
Claim(s) discussed: <u>1 and 9</u> .	
Identification of prior art discussed: Monteiro et al. (US Pe	atent 6,119,163) and Marks et al. (US Pub.: 2001/0053944).
Agreement with respect to the claims f) \boxtimes was reached.	g) was not reached. h) N/A.
allowable, if available, must be attached. Also, where no allowable is available, a summary thereof must be attached. THE FORMAL WRITTEN REPLY TO THE LAST OFFICE INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER	scussed claims 1 and 9, wherein the attorney clarified the hindependent claim 1; and the examiner agreed that the ferences of Monteiro and Marks. Idments which the examiner agreed would render the claims copy of the amendments that would render the claims ad.) ACTION MUST INCLUDE THE SUBSTANCE OF THE le last Office action has already been filed, APPLICANT IS ROF ONE MONTH OR THIRTY DAY'S FROM THIS TERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO
Examiner Note: You must sign this form unless it is an	/ALFORD KINDRED/ Examiner's signature if required